

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5						
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35	1					
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45		1				
46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.			1			
TOTAL DEP.			1	1	1	1
TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
09774620

FILING DATE  
02-05-01

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101	1					
102	1					
103	1					
104	1					
105	1					
106	1					
107	1					
108	1					
109	1					
110	1					
111	1					
112	1					
113	1					
114	1					
115	1					
116	1					
117	1					
118	1					
119	1					
120	1					
121	1					
122	1					
123	1					
124	1					
125	1					
126	1					
127	1					
128	1					
129	1					
130	1					
131	1					
132	1	1				
133	1					
134	1					
135	1					
136	1					
137	1					
138	1					
139	1					
140	1					
141	1					
142	1					
143	1					
144	1					
145	1					
146	1					
147	1					
148	1					
149	1					
150	1					
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151	1					
152	1					
153	1					
154	1					
155	1					
156	1					
157	1					
158	1					
159	1					
160	1					
161	1					
162	1					
163	1					
164	1					
165	1					
166	1					
167	1					
168	1					
169	1					
170	1					
171	1					
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174	1					
175	1					
176	1					
177	1					
178	1					
179	1					
180	1					
181	1					
182	1					
183	1					
184	1					
185	1					
186	1					
187	1					
188	1					
189	1					
190	1					
191	1					
192	1					
193	1					
194	1					
95						
96						
97						
98						
99						
100						
TOTAL IND.	181					
TOTAL DEP.	186					
TOTAL CLAIMS	194					